

Please type a plus sign (+) inside this box:

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO  
Rev. 5/95U.S. Department of Commerce  
Patent and Trademark Office

## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing

Attorney Docket Number		660005.98641
First Named Inventor		Alfonso Navarro
<b>COMPLETE IF KNOWN</b>		
Application Number		09/525,892
Filing Date		March 15, 2000
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD OF AERATING YEAST PRIOR TO PITCHING**

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YY)

March 15, 2000

as United States Application Number or PCT International

Application Number

09/525,892

and was amended on (MM/DD/YY)

n/a

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy YES	Attached? NO
n/a			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
n/a		

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

JUN 06 2000

PATENT &amp; TRADEMARK OFFICE

## DECLARATION

Page 2

I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YY)	Parent Patent Number (if applicable)
n/a			

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name

Customer Number or label

OR

List attorney(s) and/or agent(s) name and registration number below

Name	Registration Number	Name	Registration Number
Thomas W. Ehrmann	20,374	Joseph W. Bain	34,290
Barry E. Sammons	25,608	Robert J. Sacco	35,667
J. Rodman Steele	25,931	Jean C. Baker	35,433
Nicholas J. Seay	27,386	David G. Ryser	36,407
George E. Haas	27,642	Bennett J. Berson	37,094
Harvey D. Fried	28,298	Michael A. Jaskolski	37,551
Michael J. McGovern	28,326	Richard T. Roche	38,599
Carl R. Schwartz	29,437	Allen J. Moss	42,518
Gregory A. Nelson	30,577	Scott D. Paul	42,984
Keith M. Baxter	31,233	Daniel G. Radler	43,028
John D. Franzini	31,356	Steven J. Wietrzny	P44,402

Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto

Please direct all correspondence to  Customer Number or label

OR  Fill in correspondence address below

Name David G. Ryser

Address Quarles & Brady LLP

Address 411 East Wisconsin Avenue

City Milwaukee State Wisconsin Zip 53202-4497

Country USA Telephone 414/277-5717 Fax 414/271-3552

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor:  A petition has been filed for this unsigned inventor

Given Name	Alfonso	Middle Initial	n.m.i.	Family Name	Navarro	Suffix e.g. Jr.	
------------	---------	----------------	--------	-------------	---------	--------------------	--

Inventor's Signature

Date

5/8/00

Residence: City Milwaukee State WI Country USA Citizenship Spain

Post Office Address 1129 North Jackson Street, #1413-C

Post Office Address

City	Milwaukee	State	WI	Zip	53202	Country	USA	Applicant Authority
------	-----------	-------	----	-----	-------	---------	-----	---------------------

Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside this box

## DECLARATION

JUN 8 2000

JC9

## ADDITIONAL INVENTOR(S)

Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Jeffrey	Middle Initial	F.	Family Name	Fehring	Suffix e.g. Jr.	
------------	---------	----------------	----	-------------	---------	-----------------	--

Inventor's Signature							Date	5/8/2000
----------------------	--	--	--	--	--	--	------	----------

Residence: City	West Bend	State	WI	Country	USA	Citizenship	USA
-----------------	-----------	-------	----	---------	-----	-------------	-----

Post Office Address	3767 Hickory Lane						
---------------------	-------------------	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City	West Bend	State	WI	Zip	53095	Country	USA	Applicant Authority
------	-----------	-------	----	-----	-------	---------	-----	---------------------

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial	C.	Family Name	Barney	Suffix e.g. Jr.	
------------	---------	----------------	----	-------------	--------	-----------------	--

Inventor's Signature							Date	5/8/2000
----------------------	--	--	--	--	--	--	------	----------

Residence: City	Elm Grove	State	WI	Country	USA	Citizenship	USA
-----------------	-----------	-------	----	---------	-----	-------------	-----

Post Office Address	15155 Westover Road						
---------------------	---------------------	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City	Elm Grove	State	WI	Zip	53122	Country	USA	Applicant Authority
------	-----------	-------	----	-----	-------	---------	-----	---------------------

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	David	Middle Initial	S.	Family Name	Ryder	Suffix e.g. Jr.	
------------	-------	----------------	----	-------------	-------	-----------------	--

Inventor's Signature							Date	5/8/00
----------------------	--	--	--	--	--	--	------	--------

Residence: City	Mequon	State	WI	Country	USA	Citizenship	United Kingdom
-----------------	--------	-------	----	---------	-----	-------------	----------------

Post Office Address	10727 North Gazebo Hills Parkway						
---------------------	----------------------------------	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City	Mequon	State	WI	Zip	53092	Country	USA	Applicant Authority
------	--------	-------	----	-----	-------	---------	-----	---------------------

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
------------	--	----------------	--	-------------	--	-----------------	--

Inventor's Signature							Date	
----------------------	--	--	--	--	--	--	------	--

Residence: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City		State		Zip		Country		Applicant Authority
------	--	-------	--	-----	--	---------	--	---------------------

Additional inventors are being named on supplemental sheet(s) attached hereto.